



Volunteer Application Form

Ref. No

Please use this form to give us as much information as you can.
All information on this form is strictly confidential.

Name: _____

Mr / Mrs / Ms / Miss
(please indicate)

Home Address:

Date of Birth: _____

Tel No: Day: _____

Evening: _____

Mobile: _____

Email : _____

Employer: _____

Address:

Do you have a driving licence? YES / NO

Do you have use of a car? YES / NO

All applicants will have to undergo checks by the Criminal Records Bureau before they are allowed to become a mentor.

Have you ever been convicted of any criminal offence? YES / NO

If YES please give details on the following pages of this application. A conviction, bind over or caution will not automatically disqualify you from working as a volunteer, but any failure to disclose such information could result in dismissal. (This information is treated in the strictest of confidence.)

Have you had any experience of working (paid or voluntary) with young people? YES / NO
If YES, please give details

Please give details of any training courses you have attended that are relevant to mentoring.

What skills, knowledge, abilities or life experiences do you have that you feel might be relevant to this work?

Please say what made you consider becoming a volunteer mentor and any relevant facts about yourself that will support your application (Continue on back sheet if necessary)

Any disability or chronic physical or mental health condition? YES / NO
If YES, please give details

Any physical dependencies that you have had during the past two years on either drugs or alcohol? YES / NO
If YES, please give details.

Please give details of any previous convictions, bind overs or cautions

Offence / Circumstances	Date
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Please supply the names and addresses of two referees. (eg. employer, health visitor, vicar etc.)

Name :.....	Name:.....
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Address:.....	Address:.....
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Telephone No:.....	Telephone No:.....
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How known to you:.....	How known to you:.....
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May we contact this referee now? YES/NO	May we contact this referee now? YES/NO
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Please use this page to add any further information that you think will be useful for us to know.

Signature.....

Date.....

You will be required to provide proof of identity eg. passport, photo driving licence) when you attend for an interview.

The information provided in this application is true and correct. I understand I will be expected to attend training, networking and supervision sessions in addition to the time spent with a mentee. I have the time available to fulfil my mentoring.

Once completed please post or fax along with the Equal Opportunities Form to:

The Resources Manager
The Hampton Trust
Fairways House
Mount Pleasant Rd
Southampton
SO14 0QB

Tel: 023 8021 3520

Fax: 023 8021 3530